

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	BH	60045	7-6-98
O.I.P.E. CLASSIFIER			7-10-98
FORMALITY REVIEW		7435 69861	7/17/98 10/29

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	10/10/98
2	✓	✓	10/10/98
3	✓	✓	10/10/98
4	✓	✓	10/10/98
5	✓	✓	10/10/98
6	✓	✓	10/10/98
7	✓	✓	10/10/98
8	✓	✓	10/10/98
9	✓	✓	10/10/98
10	✓	✓	10/10/98
11	✓	✓	10/10/98
12	✓	✓	10/10/98
13	✓	✓	10/10/98
14	✓	✓	10/10/98
15	✓	✓	10/10/98
16	✓	✓	10/10/98
17	✓	✓	10/10/98
18	✓	✓	10/10/98
19	✓	✓	10/10/98
20	✓	✓	10/10/98
21	✓	✓	10/10/98
22	✓	✓	10/10/98
23	✓	✓	10/10/98
24	✓	✓	10/10/98
25	✓	✓	10/10/98
26	✓	✓	10/10/98
27	✓	✓	10/10/98
28	✓	✓	10/10/98
29	✓	✓	10/10/98
30	✓	✓	10/10/98
31	✓	✓	10/10/98
32	✓	✓	10/10/98
33	✓	✓	10/10/98
34	✓	✓	10/10/98
35	✓	✓	10/10/98
36	✓	✓	10/10/98
37	✓	✓	10/10/98
38	✓	✓	10/10/98
39	✓	✓	10/10/98
40	✓	✓	10/10/98
41	✓	✓	10/10/98
42	✓	✓	10/10/98
43	✓	✓	10/10/98
44	✓	✓	10/10/98
45	✓	✓	10/10/98
46	✓	✓	10/10/98
47	✓	✓	10/10/98
48	✓	✓	10/10/98
49	✓	✓	10/10/98
50	✓	✓	10/10/98

Claim	Final	Original	Date
51	✓	✓	
52	✓	✓	
53	✓	✓	
54	✓	✓	
55	✓	✓	
56	✓	✓	
57	✓	✓	
58	✓	✓	
59	✓	✓	
60	✓	✓	
61	✓	✓	
62	✓	✓	
63	✓	✓	
64	✓	✓	
65	✓	✓	
66	✓	✓	
67	✓	✓	
68	✓	✓	
69	✓	✓	
70	✓	✓	
71	✓	✓	
72	✓	✓	
73	✓	✓	
74	✓	✓	
75	✓	✓	
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88	✓	✓	
89	✓	✓	
90	✓	✓	
91	✓	✓	
92	✓	✓	
93	✓	✓	
94	✓	✓	
95	✓	✓	
96	✓	✓	
97	✓	✓	
98	✓	✓	
99	✓	✓	
100	✓	✓	

Claim	Final	Original	Date
110	✓	✓	
112	✓	✓	
113	✓	✓	
114	✓	✓	
115	✓	✓	
116	✓	✓	
117	✓	✓	
118	✓	✓	
119	✓	✓	
120	✓	✓	
121	✓	✓	
122	✓	✓	
123	✓	✓	
124	✓	✓	
125	✓	✓	
126	✓	✓	
127	✓	✓	
128	✓	✓	
129	✓	✓	
130	✓	✓	
131	✓	✓	
132	✓	✓	
133	✓	✓	
134	✓	✓	
135	✓	✓	
136	✓	✓	
137	✓	✓	
138	✓	✓	
139	✓	✓	
140	✓	✓	
141	✓	✓	
142	✓	✓	
143	✓	✓	
144	✓	✓	
145	✓	✓	
146	✓	✓	
147	✓	✓	
148	✓	✓	
149	✓	✓	
150	✓	✓	

If more than 150 claims or 10 actions  
 staple additional sheet here

(LEFT INSIDE)

Best Available Copy